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JOHP

Journal of Hospital Pharmacy
An Official Publication of Bureau for Health & Education Status Upliftment
 (Constitutionally Entitled as Health-Education, Bureau)

Case Title

Is using RABIT approach for thyroidectomy justified over open approach?

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Keywords

RABIT, CO2 insufflation, Long duration, Hypercarbia

A 48-year female came with c/o swelling on the right side of the neck for 2 years which was insidious in onset. The swelling is not associated with difficulty in swallowing, breathing or speaking. On clinical examination, it was found to be a thyroid swelling with no pressure symptoms and the patient is euthyroid status. A biopsy was done and the report revealed papillary carcinoma of the thyroid. CECT neck and thorax showed a node of size 7.7*3.7 mm in the right lobe of the thyroid with necrotic lymph nodes at cervical stations II, III and IV with no retrosternal extension and no airway involvement. Patient planned for Robotic-assisted-breast-axillo insufflation thyroidectomy with right modified radical neck dissection. The case was induced with fentanyl, propofol and vecuronium.

Access this Article Online	Quick Response Code: 
Website: http://www.journalofhospitalpharmacy.in	
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